

Work Order ID 96134-1

\*96134\*

Page 1

January-23-13 9:59:17 AM

Item ID: D2372-1  
 Revision ID:  
 Item Name: Cam Lever  
 Start Date: 1/21/13 Start Qty: 20.00  
 Required Date: 2/05/13 Req'd Qty: 20.00  
 Reference:

\*N900040100\*

Setup Start \*NS1\*  
 Stop \*NS2\*

Cust Item ID:  
 Customer:

Approvals: Process Plan: *MLJ* Date: *13-01-24* Tooling:  
 QC: Date: SPC (Y/N):

Run Start \*NR1\*  
 Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2372	B								
100		0.00							
*100*	PURCHASING								
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <i>18948</i> Possible Supplier: Reid Tools Supplier part#: KCL-208 C OF C is required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
*110*									
Packaging	Memo	0.00							
Packaging									
120	QC6- Inspect dimensions to drawing	0.00							
*120*									
QC	Memo	0.00							
Quality Control									

*126 CATTION ST GA*

*13-01-25*  
*16x*  
*SP*  
*13-01-31*  
*16*  
*13-01-31*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermofforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 96134

January-23-13 9:59:17 AM

**\*96134\***

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Item ID: D2372-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Cam Lever  
 Start Date: 1/21/13 Start Qty: 20.00 **\*20\*** Cust Item ID:  
 Required Date: 2/05/13 Req'd Qty: 20.00 **\*20\*** Customer:  
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start **\*NR1\***  
 QC: Date: SPC (Y/N): Date: Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 <b>*130*</b> Packaging Packaging	Identify as per dwg & Stock Location: <u>GA</u>  Memo	0.00  0.00				16			13-02-01 JB
140 <b>*140*</b> QC Quality Control	QC21- Final Inspection - Work Order Release  Memo	0.00  0.00							13/2/5 JB

13-02-4

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Rouze <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabelc <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

January-23-13 9:59:17 AM

Page 1

Work Order ID: 96134

Parent Item: D2372-1

Parent Item Name: Cam Lever

Start Date: 1/21/13

Required Date: 2/05/13

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP REV:A 12.02.07 new issue DD verf:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
KCL-208 Cam Lever		Purchased	No			110	Each	0.0000	1	20	30	1/6x	

SP13-01-31



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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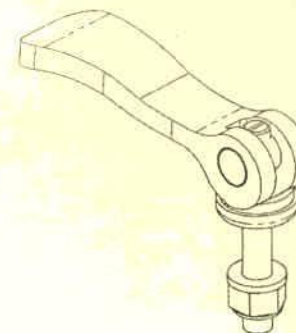
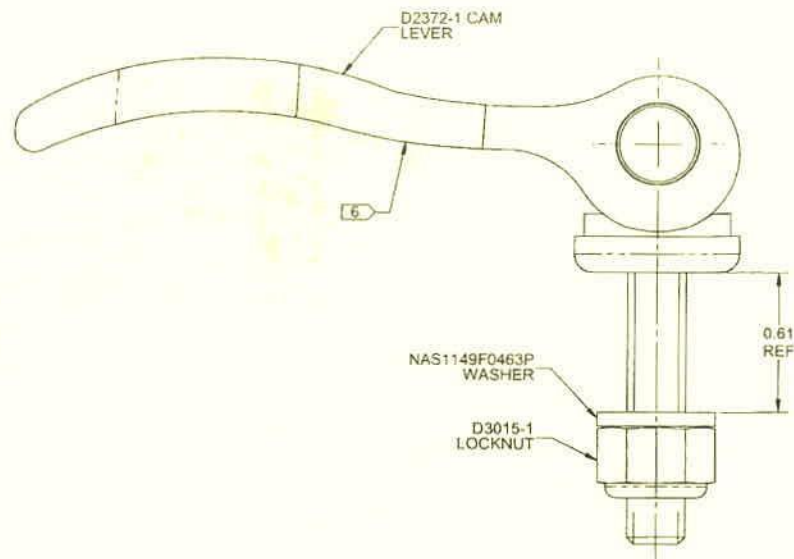
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instruction: Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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ITEM	QTY	PART NUMBER	DESCRIPTION
	X	D2372	QUICK RELEASE
1	1	D2372-1	CAM LEVER
2	1	D3015-1	LOCKNUT
3	1	NAS1149F0463P	WASHER

## SPECIFICATION CONTROL DRAWING



**D2372 QUICK RELEASE**

### NOTES:

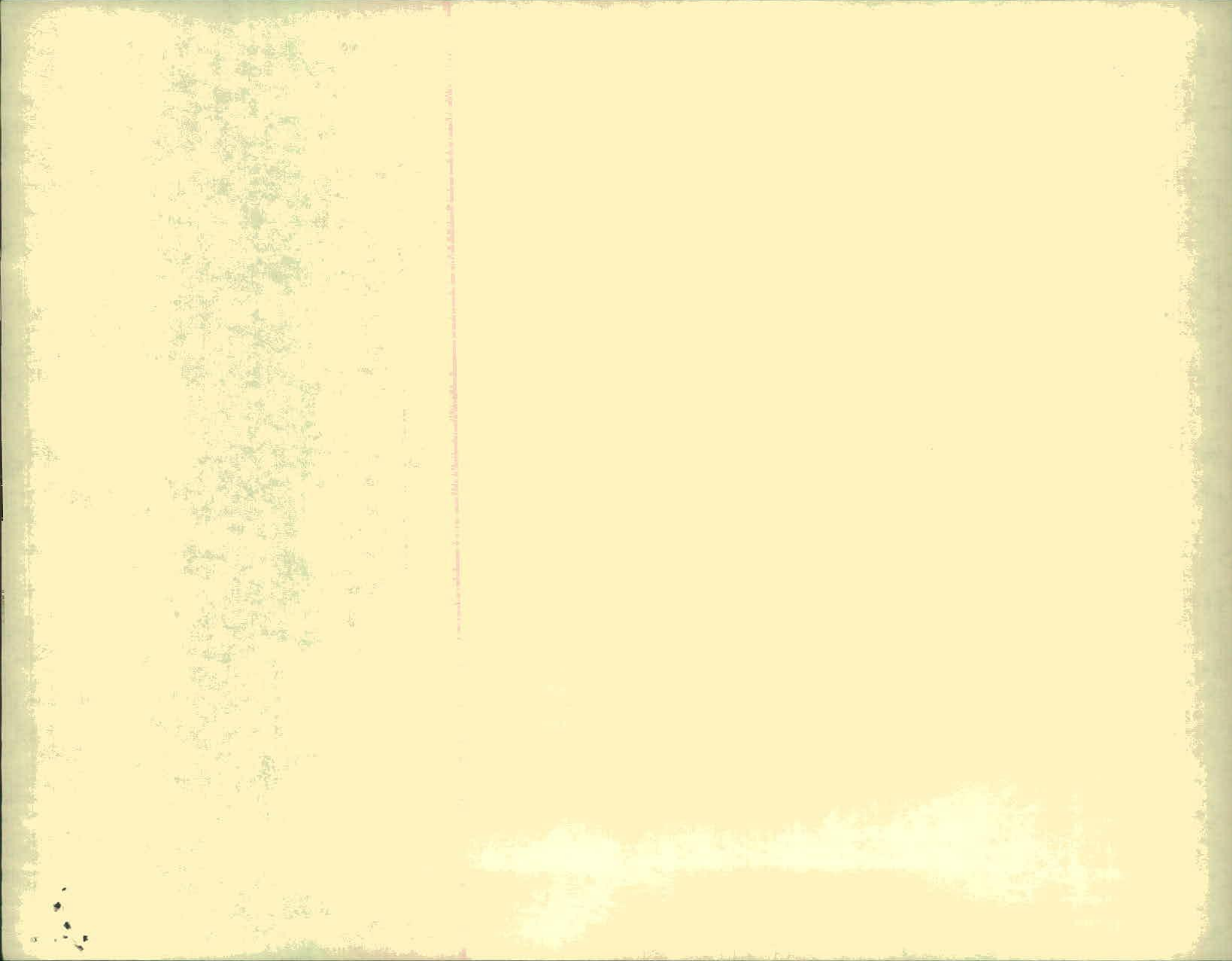
- 1) MATERIAL: SEE SHEET 2
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D2372" AND B/N "BXXXXX" PER DART QSI 044 6.5 (LABEL)
- 7) WEIGHT: 0.11 lbs

B	RE-DRAWN IAW QSI 043/044: SUPPLIER AND SUPPLIER P/N WERE "NORCO" AND "25-5129-01". REF: PART12-159.	MB	12.01.31
A	NEW ISSUE	BW	05.02.24
REV	DESCRIPTION	BY	DATE
DESIGN	BW	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN			
CHECKED	CP	DRAWING NO.	REV. B
MFG. APPR.	EC	D2372	SHEET 1 OF 2
APPROVED	WSP	TITLE	SCALE
DE APPR.		QUICK RELEASE	NTS
DATE	12.01.31	COPYRIGHT © 1995 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

96134MLS

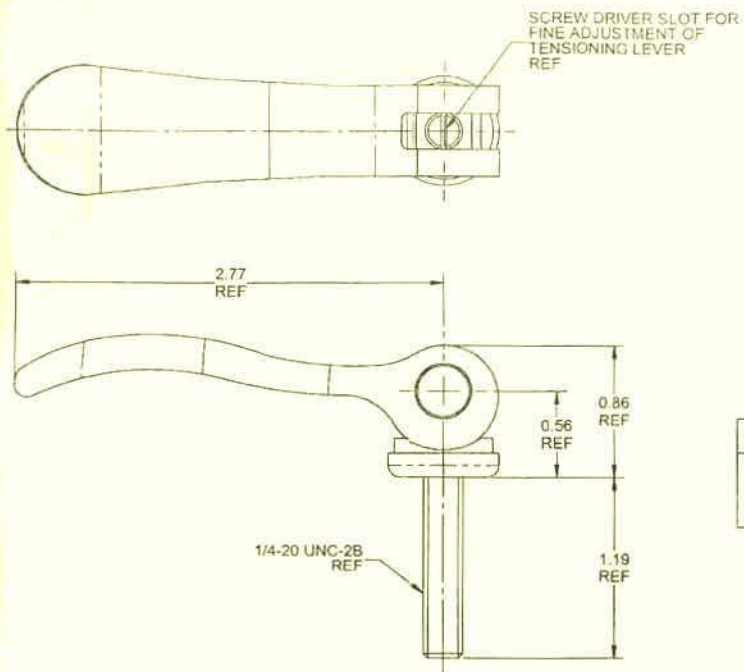
13-01-24

RELEASED  
2012-02-06  
JW





# SPECIFICATION CONTROL DRAWING



**D2372-1 CAM LEVER**

DART PART NUMBER	DESCRIPTION	SUPPLIER	SUPPLIER PART NUMBER	MATERIAL	WEIGHT
D2372-1	CAM LEVER	REID TOOLS (PREFERRED)	KCL-208	HANDLE: ALUMINUM CAM WASHER: NYLON	0.10 lbs
		McMASTER-CARR (ALTERNATE)	5720K52	THREADED STUD, PIN, CAP WASHER: STAINLESS STEEL	

96134

RELEASED  
2012-02-06

- NOTES:
- 1) MATERIAL: SEE TABLE
  - 2) FINISH: N/A
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: N/A
  - 6) IDENTIFICATION: N/A
  - 7) WEIGHT: SEE TABLE

DESIGN	BV	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	BP		
CHECKED	BP	DRAWING NO.	REV. B
MFG. APPR.	BP	D2372	SHEET 2 OF 2
APPROVED	BP	TITLE	SCALE
DE APPR.	BP	QUICK RELEASE.	NTS
DATE	12.01.31	COPYRIGHT © 1999 BY DART AEROSPACE LTD THIS DOCUMENT IS UNCLASSIFIED AND IS AVAILABLE ON THE OPEN SOURCE CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMERCE OR COMMERCIALIZED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	







Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO18948

Purchase Order Date 1/25/2013

PO Print Date 1/28/2013

Page Number 1 of 1

Order From :

VU-REI001

REID TOOL SUPPLY CO.  
PO BOX 179  
MUSKEGON,, MI 494430179  
US

Contact Name  
Vendor Phone 800 253 0421  
Vendor Fax 800 438 1145  
Vendor Account Nbr

Buyer Brigitte Golden  
Requisition Nbr  
Tax Resale Nbr 10127-2607  
Terms Net 30  
Currency USD  
FOB Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
	KC-208	Cam Lever	1/25/2013 Yes	30.00 Each	FedEx PI collect	\$21.3248	\$639.74

Special Inst: AS PER DWG: D2372 REV: B  
B96134

PO Total: \$639.74

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO

Change Nbr: 2

Change Date: 1/28/2013







P.O. #: PO18948

Shipper No 04640137-1

2265 Black Creek Rd \* Muskegon \* MI \* 49444-2684  
Phone: 800.253.0421 \* Email: sales@reidsupply.com  
Fax: 800.438.1145 \* Web: ReidSupply.com

Page 1 of 1

Bill To: DART AEROSPACE  
1270 ABERDEEN ST  
HAWKESBURY, ON K6A 1K7  
Canada

Ship To: DART AEROSPACE  
1270 ABERDEEN ST  
HAWKESBURY, ON K6A 1K7  
Canada

Phone

Attn:

Customer No	Your P.O. No	Sched Date	Ship Via	Ship Date	Shipper No
215650	PO18948	01/25/13	FED-EX INTL PRIORITY/COLLECT	01/30/13	04640137-1

Line	Order Qty	Item	Description	Qty Shipped	Back Order
1	16	KCL-208	2.77 SS ADJ CAM LEVER 1/4-20 X 1.18 STUD	16	0
P/O: PO18948				HS Tariff Code:	392690
				Country of Origin:	Germany
				21.3248	341.20

We will ship a partial today per your request  
Thank you

Value in US Funds: 341.20

Terms: Net 30 Days

Total Number of items: 1

Estimated Weight: 2 lb 8.96 oz 1.162 kg

Opr: LAA Branch: 11 SLISM: REID

Picker:

8813-01-31

All sales of products or services by Reid Supply Company  
of Sale, incorporated by reference and available at ReidSupply.com

are made subject to the Terms and Conditions  
or by calling 231.777.3951

If Buyer has not otherwise agreed to those terms, then Buyers acceptance of delivery of and/or payment for the  
products or services will constitute buyer's acceptance of the Terms and Conditions of Sale.

## CERTIFICATION OF COMPLIANCE

Reid Supply Company

States the above material purchased was supplied in accordance with the description as illustrated in our catalog and our website.

THANK YOU VERY MUCH FOR YOUR ORDER

Packing List

Cathy Reid Document Control Supervisor

Packing List






# North American Free Trade Agreement Certificate of Origin

Please Print or Type

Shipper Number: 04640137-1

Page 1 of 1

<b>1. EXPORTER NAME AND ADDRESS:</b> Reid Supply Company 2265 Black Creek Rd Muskegon, MI 49444  Tax Identification Number: 45-3087774			<b>2. BLANKET PERIOD (MM/DD/YR)</b>  FROM: 01/30/13  TO: 02/13/13			
<b>3. PRODUCER NAME AND ADDRESS</b>  AVAILABLE TO CUSTOMS UPON REQUEST  Tax Identification Number:			<b>4. IMPORTER NAME AND ADDRESS:</b> DART AEROSPACE 1270 ABERDEEN ST HAWKESBURY, ON K6A 1K7 Canada  Tax Identification Number:			
<b>5. DESCRIPTION OF GOODS:</b>	<b>6. H.S. TARIFF CLASSIFICATION NUMBER</b>	<b>7. PREFERENCES CRITERION</b>	<b>8. PRODUCER</b>	<b>9. NET COST</b>	<b>10. COUNTRY OF ORIGIN</b>	
KCL-208  2.77 SS ADJ CAM LEVER 1/4-20 X 1.18 STUD	392690	B	NO2	NO	DEU	
<p>I CERTIFY THAT:</p> <ul style="list-style-type: none"> <li>• THE INFORMATION ON THIS DOCUMENT IS TRUE AND ACCURATE AND I ASSUME THE RESPONSIBILITY FOR PROVING SUCH REPRESENTATIONS. I UNDERSTAND THAT I AM LIABLE FOR ANY FALSE STATEMENTS OR MATERIAL OR OMISSIONS MADE ON OR IN CONNECTION WITH THIS DOCUMENT;</li> <li>• I AGREE TO MAINTAIN, AND PRESENT ON REQUEST, DOCUMENTATION NECESSARY TO SUPPORT THIS CERTIFICATE, AND TO INFORM, IN WRITING, ALL PERSONS TO WHOM THIS CERTIFICATE WAS GIVEN OF ANY CHANGES THAT COULD AFFECT THE ACCURACY OR VALIDITY OF THIS CERTIFICATE;</li> <li>• THE GOODS ORIGINATED IN THE TERRITORY OF ONE OR MORE OF THE PARTIES, AND COMPLY WITH THE ORIGIN REQUIREMENTS SPECIFIED FOR THOSE GOODS IN THE NORTH AMERICAN FREE TRADE AGREEMENT, AND UNLESS SPECIFICALLY EXEMPTED IN ARTICLE 411 OR ANNEX 401, THERE HAS BEEN NO FURTHER PRODUCTION OR ANY OTHER OPERATION OUTSIDE THE TERRITORIES OF THE PARTIES; AND</li> <li>• THIS CERTIFICATE CONSISTS OF 1 PAGES, INCLUDING ALL ATTACHMENTS.</li> </ul>						
<b>11. AUTHORIZED SIGNATURE:</b>  		COMPANY Reid Supply Company				
NAME CATHY REID		TITLE DATA DOCUMENT CONTROL SUPERVISOR				
DATE (MM/DD/RR) 01/30/13		TELEPHONE 231 777 3951		FAX: 231 773 4485		

100

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